



Leander Citizens on Patrol Applicant Questionnaire



Name: _____

Date of Birth: _____

Cell Phone #: _____

DL # /State: _____

Home Phone #: _____

Alternate _____

Phone #: _____

Email Address: _____

Best Way to reach you on short notice:

| |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |
| <input type="checkbox"/> |

Cell Phone

Email

Other: _____

Are you a graduate of the Leander Basic Citizens Police Academy?

| |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |

YES

NO

What year did you graduate the Basic CPA? _____

Who was your Basic CPA Class Coordinator? _____

Are you a graduate of the Leander Advanced Citizens Police Academy?

| |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |

YES

NO

What year did you graduate the Advanced CPA? _____

Who was your Advanced CPA Class Coordinator? _____

If you are not an Advanced CPA Graduate, will you be able to attend the next available Advanced CPA class?

| |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |

YES

NO

Are you currently a member of the LCPAAA?

| |
|--------------------------|
| <input type="checkbox"/> |
| <input type="checkbox"/> |

YES

NO

What year did you join the LCPAAA? _____

Are you a full time resident of Williamson or Travis County?

☐
☐

YES
NO

Do you have a valid TX drivers license with less than 5 traffic violations in the past 5 years?

☐
☐

YES
NO

Do you have access to, and are you able to use a computer?

☐
☐

YES
NO

If accepted into the program, do you agree to perform at least 16 hours of community service a month, including at least 8 hours of patrol duties?

☐
☐

YES
NO

Are you willing and able to attend the Citizens on Patrol academy whenever it is scheduled?

☐
☐

YES
NO

Are you willing to submit to a polygraph or drug test at the discretion of the Leander Police Department?

☐
☐

YES
NO

Are you able to physically stand for 4 or more hours, and lift at least 30 lbs?

☐
☐

YES
NO

Do you have a Concealed Handgun License?

☐
☐

YES
NO

If "Yes" please list the state and License Number:

Please list all clubs, organizations, and associations you are a member of or frequently attend meetings and events for:

Signature: _____

Date: _____

Please Mail, Email, or Hand Deliver completed form to:



Community Services Officer
Leander Police Department
705 Leander Drive
Leander, TX 78641
512-528-2821

CommunityServices@leandertx.gov